

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD		8-15-00
O.I.P.E. CLASSIFIER		49	8/18/00
FORMALITY REVIEW	DO	6089	9-25-00
RESPONSE FORMALITY REVIEW	4		10-30-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	08/15/00
2	✓	✓	08/15/00
3	✓	✓	08/15/00
4	✓	✓	08/15/00
5	✓	✓	08/15/00
6	✓	✓	08/15/00
7	✓	✓	08/15/00
8	✓	✓	08/15/00
9	✓	✓	08/15/00
10	✓	✓	08/15/00
11	✓	✓	08/15/00
12	✓	✓	08/15/00
13	✓	✓	08/15/00
14	✓	✓	08/15/00
15	✓	✓	08/15/00
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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